

ISSUE SLIP STAPLE AREA (for additional cross references)

P SITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	5-1	32	5/18
FORMALITY REVIEW	GG	912	10/15/01
RESPONSE FORMALITY REVIEW	A T	1071	03/26/02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 - Restricted O Objected

Claim	Date
Final	
Original	
1	10/20/02
2	10/20/02
3	10/20/02
4	10/20/02
5	10/20/02
6	10/20/02
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9	10/20/02
10	10/20/02
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49	10/20/02
50	10/20/02

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here